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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<i>Attorney Docket No.</i>	ECI06-GN009
<i>First Inventor</i>	Keller, et al
<i>Title</i>	Self-Adjusting Child Ham
<i>Express Mail Label</i>	EL 796512935US

22389  
107684655  
U.S. PTO**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

- |   |   |
|---|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original and a duplicate for fee processing)</i>                         | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )                                  |
| 2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.   | 8. Nucleotide and/or Amino Acid Sequence Submission<br><i>(if applicable, all necessary)</i>  |
| 3. <input checked="" type="checkbox"/> Specification <i>[Total Pages 17]</i><br><i>(preferred arrangement set forth below)</i>  | a. <input type="checkbox"/> Computer Readable Form (CRF)  |
| - Descriptive title of the invention  | b. <input type="checkbox"/> Specification Sequence Listing on:  |
| - Cross Reference to Related Applications   | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or   |
| - Statement Regarding Fed sponsored R & D   | ii. <input type="checkbox"/> Paper  |
| - Reference to sequence listing, a table, or a computer program listing appendix  | c. <input type="checkbox"/> Statements verifying identity of above copies   |
| - Background of the Invention   |   |
| - Brief Summary of the Invention  |   |
| - Brief Description of the Drawings ( <i>if filed</i> )   |   |
| - Detailed Description  |   |
| - Claim(s)  |   |
| - Abstract of the Disclosure  |   |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <i>[Total Sheets 3]</i>   |   |
| 5. Oath or Declaration <i>[Total Sheets 3]</i>  |   |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy)  | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))   |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><i>(for continuation/divisional with Box 18 completed)</i>                                | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney<br><i>(when there is an assignee)</i>        |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | 11. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> )  |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76   | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations                 |
|   | 13. <input type="checkbox"/> Preliminary Amendment  |
|   | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i>                        |
|   | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i>                                |
|   | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. |
|   | 17. <input type="checkbox"/> Other: .....   |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation       Divisional       Continuation-in-part (CIP)      of prior application No. .....

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_  
**For CONTINUATION OF DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number:	030074		OR	<input type="checkbox"/> Correspondence address below
Name	Taft, Stettinius & Hollister, LLP			
Address	425 Walnut Street Suite 1800			
City	Cincinnati	State	OH	Zip Code
Country	U.S.A.	Telephone	513-381-2838	Fax
Name (Print/Type)	Ryan L. Willis	Registration No. (Attorney/Agent)	48,787	
Signature				Date
				10-14-2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

11324 U.S. PTO  
10/14/03

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1072.00)

## Complete if Known

Application Number	
Filing Date	10-13-2003
First Named Inventor	Keller et al.
Examiner Name	
Art Unit	
Attorney Docket No.	ECI06-GN009

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account:

Deposit Account Number	200053
Deposit Account Name	Taft Stettinius & Hollist

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

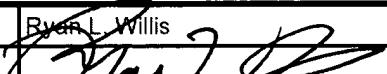
## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	770.00
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>		<b>(\$ 770.00)</b>	
<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>			
Total Claims	32	Extra Claims Fee from below	Fee Paid
Independent Claims	4	-20** = 12 X 18 = 216.	
Multiple Dependent		-3** = 1 X 86 = 86.	
<b>SUBTOTAL (2)</b>		<b>(\$ 302)</b>	
*or number previously paid, if greater; For Reissues, see above			
*Reduced by Basic Filing Fee Paid			
<b>SUBTOTAL (3)</b>		<b>(\$)</b>	

(Complete if applicable)

## SUBMITTED BY

Name (Print/Type)	Ryan L. Willis	Registration No. (Attorney/Agent)	48,787	Telephone	513-357-9663
Signature					
Date	10-14-2003				

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.